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## UTILITY PATENT APPLICATION TRANSMITTAL

Attomey Docket No.	862.C1843	
First Name	d Inventor or Application Identifier	
KAZUTAKA MATSUEDA		
Former Adella et al Ale		

	. (	(Only for new nonprovisional applications under 37 CFR 1.53(b))				E	xpress Mail	Label No.						
	0	See MPEP chapter 600 concerning utility patent application contents.						ADDRESS TO:  Assistant Commissioner for Patents  Box Patent Application  Washington, DC 20231						
	1.		Fee Transmittal Form (Submit an original, and a duplicate for fee processing)					6. Microfiche Computer Program (Appendix)						
	2.	x	Specification Total Pages 49				9		7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)					
	3.	х	Drawing	(s) (35 US	C 113)	Total She	ets 1	3			$\equiv$	Computer Readable Paper Copy (identic		r copy)
	4.	X	Oath or	Declaration	n	Total Pag	es 1				c	Statement verifying	identity of abo	ove copies
,=			a	Newly ex	kecuted (o	riginal or co	py)				ACCOM	PANYING APPLIC	CATION PART	s
		b. X Unexecuted for information purposes					8.	Assignment	Papers (cover sheet	& document(s))				
The time the court is the print it.			c. Copy from a prior application (37 CFR 1.63(d))  (for continuation/divisional with Box 17 completed)  [Note Box 5 below]					9. 37 CFR 3.73(b) Statement (when there is an assignee) Power of Attorney						
J) and thing				i. DELETION OF INVENTOR(S)  Signed Statement attached deleting inventor(s) named in the prior application, see 37 CFR					10.	English Tra	anslation Documen	t (if applicable)		
ġŧ.	5. Incorporation By Reference (useable if Box 4c is checked) The entire disclosure of the prior application, from which a copy of the				tho	11.	11. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations							
A 344 A					ng	12. Preliminary Amendment								
Total I	)		Поогрога	ned by relei	ence merei					13. X		ceipt Postcard (MP specifically itemize	•	
C	ļ									14.	Small Entit Statement		ent filed in prior still proper and o	• •
										15.		opy of Priority Docu priority is claimed)	ument(s)	
						16.	Other:							
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	17	. If a C	Contin			check app ivisional	ropriate l				information: of prior app	olication No/_		
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X Customer Number or Bar Code Label (Insert Customer No. or Attach bar						abel here)	or Corres	spondence addre	ess below					
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	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATION
	TOTAL CLAIMS (37 CFR 1.16(c))	30-20 =	10	X \$ 18.00 =	\$180.00
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	12-3 =	9	X \$ 78.00 =	\$702.00
	MULTIPLE DEPENDEN	\$ 0.00			
BAS (37 CF				BASIC FEE (37 CFR 1.16(a))	\$690.00
			Total of	above Calculations =	\$1,572.00
	Reduction by	50% for filing by small en	ntity (Note 37 CFR 1.9, 1	.27, 1.28).	
				TOTAL =	\$1,572.00
		er claimed.			
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED				
NAME	Joseph W. Ragusa (38,586)			
SIGNATURE	Joseph W. Rogusa			
DATE	February 23/2000			

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